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Bib Data Sheet

CONFIRMATION NO. 2735

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>10/730,003 | <b>FILING OR 371(c)<br/>DATE</b><br>12/09/2003<br><b>RULE</b> | <b>CLASS</b><br>375 | <b>GROUP ART UNIT</b><br>2611 | <b>ATTORNEY DOCKET<br/>NO.</b><br>500.35527CX2 |
|------------------------------------|---|---------------------|-------------------------------|--|

## APPLICANTS

Takashi Shiba, Yokosuka-shi, JAPAN;  
Akitsuna Yuhara, Tokyo, JAPAN;  
Yoshihiro Yamada, Yokohama-shi, JAPAN;  
Yasuhiro Ohta, Chigasaki-shi, JAPAN;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 09/558,373 04/26/2000 PAT 6,697,418 which is a CON of 08/875,182 07/21/1997 PAT 6,134,264  
which is a 371 of PCT/JP95/00129 02/01/1995 *ml* 1/7/2007

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*  
03/08/2004 *ml* 1/7/2007

|  |                                      |                                 |                               |                                    |
|--|--------------------------------------|---------------------------------|-------------------------------|------------------------------------|
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no   | <b>STATE OR<br/>COUNTRY</b><br>JAPAN | <b>SHEETS<br/>DRAWING</b><br>13 | <b>TOTAL<br/>CLAIMS</b><br>12 | <b>INDEPENDENT<br/>CLAIMS</b><br>1 |
| 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                                      |                                 |                               |                                    |
| Verified and Acknowledged <i>[Signature]</i><br>Examiner's Signature   | <i>ml</i><br>Initials                |                                 |                               |                                    |

## ADDRESS

20457

## TITLE

Spread spectrum communication device and communication system *ml*

|                                       |   |   |
|---------------------------------------|---|---|
| <b>FILING FEE<br/>RECEIVED</b><br>770 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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